Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 29, 1999

CLAIMS AS FILED - PART I (Column 1) (Column 2)						SMALL ENTITY		OTHER THAN OR SMALL ENTITY			
FOR			(Column 1) (Colum NUMBER FILED NUMBER E			TYPE RATE		OR			
run			DIVIDEN FILED	NOMBER	NOMBER EXTRA		FEE		RATE	FEE	
BASIC FEE							345.00	OR		690.00	
TOTAL CLAIMS			minus 2	0= *		X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			minus 3	3 = *		X39=		OR	X78=		
MU	LTIPLE DEPEN	DENT CLA	AIM PRESENT	+130=		OR	+260=				
* If	the difference	in column	1 is less than zer	TOTAL		OR	TOTAL	(40			
	CI	LAIMS A	AS AMENDED			-	OTHER				
		(Colum		(Column 3)	SMALL	ENTITY	OR	SMALL			
AMENDMENT A		CLAIM REMAIN AFTEI AMENDM	ING R	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	.12	Minus	**	=	X\$ 9=		OR	X\$18=		
	Independent	. 4	Minus	*** <u>}</u>	= /	X39=		OR	X78=	84	
	FIRST PRESE	NIATION	OF MULTIPLE DEP	ENDENT CLAIM		+130=		OR	+260=		
						TOTA		OR	TOTAL	84	
					ADDIT. FE	Ε	10	ADDIT. FEE			
		(Colum		(Column 2) HIGHEST	(Column 3)		1 4001	1 1	· -	400	
AMENDMENT B		REMAIN AFTE AMENDA	IING R	NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**	=	X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***	=	X39=		OR	X78=		
	FIRST PRESE	NIATION	OF MULTIPLE DEF	PENDENT CLAIM		+130=		OR	+260=		
			TOTA		OR	TOTAL					
i.	•				ADDIT. FE	E L		ADDIT. FEE			
_		(Colum		(Column 2) HIGHEST	(Column 3)	ļ <u></u>					
AMENDMENT C		REMAIN AFTE AMENDI	IING R	NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**	= :	X\$ 9=		OR	X\$18=		
	Independent	•	Minus	***	=	X39=	1	OR	X78=		
	FIRST PRESE	NTATION	OF MULTIPLE DE]		1 ັ່່					
	If the entry in eath	mp 1 io loca	than the entry in colu	ımn 2 write "O" in e	olumn 3	+130=		OR	+260=	ļ	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											
1	The "Highest Nun	nber Previo	usly Paid For" (Total o	r Independent) is th	e highest numbe	er found in the	appropriate bo	x in co	olumn 1.		

This Form is for INTERNAL PTO USE ONLY It does NOT get mailed to the applicant.

NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION	YNUMBER:			<u> </u>		
		Total Fee	: Calculado	£2		
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Bwie Filib; Fee	201/101				<u>690</u>	
Total Claims > 20	203/103	-20 -			-	
Independent Claims > }	- <u>201/102</u>	<u> </u>	х			
Multi Dep Claim Present	<u> </u>				-	
Swahuga	200/105	,			/30 .	
Eaglish Translation	139					
TOTAL FEE CALCUL	Аттон					
Fees due upon <u>filing</u> :	င်း application:					
Total Filing Fees Due	:= \$		820			
Less Filling Fees Suba	ವುದ್ವರ - S			· :	,	
PAT ANCT DIT		(720			

Office of Initial Patent Examination